



State of Washington
Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use

Fee Paid

Date

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name: City of Tumwater

Home Tel: (____) ____ - ____

Mailing Address: 555 Israel Road SW

Work Tel: (360) 754 - 4140

City: Tumwater

State: WA

Zip+4: 98501+6515

FAX: (360) 754 - 4142

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☒ Same as above.

Name: Kathy Callison, Water Resources Program Manager

Home Tel: (____) ____ - ____

Mailing Address: ____

Work Tel: (____) ____ - ____

City: ____

State: ____

Zip+4: ____ + ____

FAX: (____) ____ - ____

Relationship to applicant: ____

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 2,226 (☒ gallons per minute or ☐ cubic feet per second) from a ☐ surface water source or ☒ ground water source (check only one) for the purpose(s) of Municipal Water Supply.

ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.

Estimate a maximum annual quantity to be used in acre-feet per year: 2,154

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From ____ / ____ / ____ to ____ / ____ / ____

Section 4. WATER SOURCE

| If SURFACE WATER | | | | | | If GROUNDWATER | | |
|--|------|---------|----------|------------|----------|---|-------|-------------|
| Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.: | | | | | | A permit is desired for <u>5</u> well(s). | | |
| Number of diversions: ____ | | | | | | | | |
| Source flows into (name of body of water): | | | | | | Size & depth of well(s): To be determined. | | |
| LOCATION | | | | | | | | |
| Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: | | | | | | | | |
| ¼ of | ¼ of | Section | Township | Range(E/W) | County | If location of source is platted, complete below: | | |
| | | | | | | Lot | Block | Subdivision |
| NE | SW | 16 | 17 | 2W | Thurston | | | |
| | | | | | | | | |
| For Ecology Use Date Received: <u>2-11-05</u> Priority Date: <u>2-11-05</u> | | | | | | | | |
| SEPA: Exempt/Not Exempt FERC License # _____ Dept. Of Health # _____ | | | | | | | | |
| Date Accepted As Complete <u>2-17-05</u> By _____ Date Returned _____ By _____ WRIA: <u>23</u> | | | | | | | | |

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: City of Tumwater, PWSID: WA89700Q
- B. Briefly describe your proposed water system.

The proposed wellfield will initially serve as a satellite system owned and operated by the City of Tumwater. As the city's distribution system expands in the future, this satellite system will be integrated into the larger water system. These changes will be undertaken consistent with applicable regulations and incorporated into water system plan updates as appropriate.

- C. Do you already have any water rights or claims associated with this property or system? ☒ YES ☐ NO
PROVIDE DOCUMENTATION.
Please refer to Table 4.1, Water Resources Analysis, City of Tumwater Water System Plan (2003), attached.

Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION
(Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: As authorized by the adopted Water System Plan for the City of Tumwater's water service area.
Type of connections: Municipal Supply Purposes
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system?
☐ YES ☐ NO **NOT APPLICABLE (Area served by the City of Tumwater)**
If yes, explain why you are unable to connect to the system. *Note: Regional water systems are identified by your County Health Department.*

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☒ YES ☐ NO
If yes, when was it approved? December 2003 Please attach the current approved version of your plan.
See attached Tables 4.2 & 4.3. Complete Water System Plan available upon request.
- D. Do you have an approved conservation plan? ☒ YES ☐ NO
If yes, when was it approved? December 2003 Please attach the current approved version of your plan.
See attached Tables 4.2 & 4.3. Complete Water System Plan available upon request.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION
(Complete for all irrigation and agriculture uses.)

NOT APPLICABLE (Municipal Supply Purposes)

- A. Total number of acres to be irrigated:
- B. List total number of acres for other specified agricultural uses:
- | | |
|------------|--------------|
| Use: _____ | Acres: _____ |
| Use: _____ | Acres: _____ |
| Use: _____ | Acres: _____ |
- C. Total number of acres to be covered by this application: _____
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of 2001)
Add up the acreage in which you have a controlling interest, including only:
‡ Acreage irrigated under water rights acquired after December 8, 1977;
‡ Acreage proposed to be irrigated under this application;
‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 6000 acres? ☐ YES ☐ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO
If yes, enter permit no: _____
- E. Farm uses:
Stockwater - Total # of animals _____ Animal type _____ (If dairy cattle, see below)
Dairy - # Milking _____ # Non-milking _____

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO

In the future, water storage may be required at the site. In that event, proposed improvements will be incorporated into water system plan updates.

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

From Seattle: I-5 South to exit # 99. Make right onto 93rd Avenue. Drive approximately 900'; turn right into driveway at 2842 93rd Ave. Dirt road to well location at the end of driveway.

From Portland: I-5 North to exit #99. Make left onto 93rd Avenue. Turn right into driveway at 2842 93rd Ave. Dirt road to well location at end of driveway.

Section 10. REQUIRED MAP

A. Attach a map of the project.

See attached.

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used? – NOT APPLICABLE ☐ YES ☐ NO
If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):
Place of Use is the area served by the City of Tumwater.

B. Does the applicant own the land on which the water source is located? ☐ YES ☒ NO
If no, submit a copy of agreement:
The City of Tumwater has installed a test well on site under a right-of-entry agreement with the Black Hills Community Soccer Complex, which is the owner. Easements will be acquired from the Black Hills Soccer Complex and adjacent landowners as necessary to develop water supply. Copies of the easement documentation will be forwarded to Ecology when completed.
Landowner contact:

Herb Reeves
Black Hills Community Soccer Complex
P.O. Box 4439
Tumwater, WA 98501-4439

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Kathleen Callison
Applicant (or authorized representative)
Water Resources Program Manager
City of Tumwater
Same

2/10/05
Date

Landowner for place of use (if same as applicant, write "same")

Date